

Declaration and Power of Attorney For Patent Application

English Language Declaration

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

PET BED WITH REMOVABLE BOLSTER

the specification of which

(check one)

☒ is attached hereto.

☐ was filed on _____ as

Application Serial No. _____

and was amended on _____
(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

Priority Claimed

<u>None</u>	_____	_____
(Number)	(Country)	(Day/Month/Year Filed)
_____	_____	_____
(Number)	(Country)	(Day/Month/Year Filed)
_____	_____	_____
(Number)	(Country)	(Day/Month/Year Filed)

<input type="checkbox"/>	<input type="checkbox"/>
Yes	No
<input type="checkbox"/>	<input type="checkbox"/>
Yes	No
<input type="checkbox"/>	<input type="checkbox"/>
Yes	No

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

None

(Application Serial No.)

(Filing Date)

(Status)
(patented, pending, abandoned)

(Application Serial No.)

(Filing Date)

(Status)
(patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. Charles A. Laff (19787); J. Warren Whitesel (16830); Robert F.I. Conte (20354); Larry L. Saret (27674); Martin L. Stern (28911); Bernard L. Kleinke (22123); Louis Altman (19373); Barry W. Sufrin (27398); Marshall W. Sutker (19962); Jennifer A. Dunner (33685); Neil R. Ormos (35309); Richard P. Gilly (37630); Kevin C. Trock (37745); and Jack R. Halvorsen (18394).

Send Correspondence to: LAFF, WHITESEL, CONTE & SARET, LTD., 401 North Michigan Avenue, Chicago, Illinois 60611.

Direct Telephone Calls to: Larry L. Saret
at telephone No. (312) 661-2100.

Full name of sole or first inventor	<u>1-00</u>	<u>4/15/96</u>
<u>Scott Haugh</u>		Date
Inventor's signature	<u>Scott Haugh</u>	
Residence	<u>829 SOUTH ST. LOCKPORT IL 60441</u>	
Citizenship	<u>United States Of America</u>	
Post Office Address		
Full name of second joint inventor, if any	<u>None</u>	
Second Inventor's signature		Date
Residence		
Citizenship		
Post Office Address		

(Supply similar information and signature for third and subsequent joint inventors.)

1300-112

Declaration and Power of Attorney For Patent Application

English Language Declaration

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

PET RED WITH REMOVABLE BOLSTER

the specification of which

(check one)

☒ is attached hereto.

☐ was filed on _____ as

Application Serial No. _____

and was amended on _____ (if applicable)

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Prior Foreign Application(s)

Priority Claimed

None				
(Number)	(Country)	(Day/Month/Year Filed)	Yes	No
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

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<u>None</u>		
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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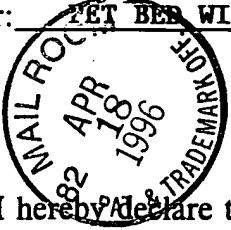
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at telephone No. (312) 661-2100.

Full name of sole or first inventor	
Scott Haugh	4/15/96
Inventor's signature	Date
<i>Scott Haugh</i>	
Residence	
829 SOUTH ST. LOCKPORT IL 60441	
Citizenship	
United States Of America	
Post Office Address	
Full name of second joint inventor, if any	
None	
Second Inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

(Supply similar information and signature for third and subsequent joint inventors.)

Applicant or Patentee: Scott Haugh Attorney's
Serial or Patent No: _____ Docket No: 1300-112
Filed or Issued: herewith
For: PET BED WITH REMOVABLE BOLSTER



**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL
ENTITY STATUS (37 CFR 1.9(f) and 1.27)**

I. I hereby declare that I am making this verified statement to support a claim by Flexi-Mat Corporation
for small entity status for purposes of paying reduced fees under section 41(a) and (b)
of Title 35, United States Code, with regard to the invention entitled
PET BED WITH REMOVABLE BOLSTER
by inventor(s) Scott Haugh
described in
☒ (X) the specification filed herewith
☐ () application serial No. _____, filed _____
☐ () patent no. _____, issued _____

II. I hereby declare that I am:

☐ () A. The above-named inventor and qualify as an independent inventor as defined in 37 CFR 1.9(c).

I have not assigned, granted, conveyed or licensed and am under no obligation under law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

☐ () B. A non-inventor making this verified statement to support a claim by _____. I hereby declare that I would qualify as an independent inventor as defined in Section II.A., above.

☐ () C. An official empowered to act on behalf of a nonprofit organization as defined in 37 CFR 1.9(e) and identified below:

NAME OF ORGANIZATION _____
ADDRESS OF ORGANIZATION _____

TYPE OF ORGANIZATION:

- ☐ () UNIVERSITY OR OTHER INSTITUTION OF HIGHER EDUCATION
☐ () TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 USC 501(a) and 501(c) (3))
☐ () NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA
(NAME OF STATE _____)
☐ () (CITATION OF STATUTE _____)
☐ () WOULD QUALIFY AS TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 USC 501(a) and 501(c) (3) IF LOCATED IN THE UNITED STATES OF AMERICA
☐ () WOULD QUALIFY AS NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA IF LOCATED IN THE UNITED STATES OF AMERICA
(NAME OF STATE _____)
(CITATION OF STATUTE _____)

LAFF, WHITESEL, CONTE & SARET, LTD.
ATTORNEYS AT LAW
401 N. MICHIGAN AVENUE
CHICAGO, ILLINOIS 60611

- (x) D. An owner or official of a small business concern empowered to act on behalf of the concern identified below:

NAME OF CONCERN Flexi-Mat Corporation
ADDRESS OF CONCERN 2244 South Western Avenue
Chicago, IL 60608

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

- III. I hereby declare that rights in the above-identified invention under contract or law exist in or have been conveyed to and remain with the small business concern identified above with regard to the invention.

—If the rights held by the above-identified small business concern are not exclusive, each individual, concern or organization having rights in the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d), or a nonprofit organization under 37 CFR 1.9(e).

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27).

NAME _____

ADDRESS _____

() INDIVIDUAL () SMALL BUSINESS CONCERN () NONPROFIT ORGANIZATION

NAME _____

ADDRESS _____

() INDIVIDUAL () SMALL BUSINESS CONCERN () NONPROFIT ORGANIZATION

- IV. I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING James N. Klesh
TITLE IN ORGANIZATION President
ADDRESS OF PERSON SIGNING 2244 South Western Avenue
Chicago, IL 60608

SIGNATURE [Signature]

DATE 4/5/96